| B1 (Official  | Form 1)(1/  |   | United   | States   | Donk  | muntar                                      | Count  |  |   | I  |   |   |
|---|---|---|--|--|---|---|--|--|---|--|---|---|
| United States Bankruptcy C<br>District of Minnesota   |   |   |  |  |   | Court                                       | Voluntary Petiti   |  |   | Petition   |   |   |
| Name of Debtor (if individual, enter Last, First, Middle): Thibodeau, Michael Darwin  |   |   |  |  |   |   |  | ebtor (Spouse<br>Corinne De  | e) (Last, First,<br>enise   | Middle):   |   |   |
| All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):  |   |   |  |  | All O   | ther Names<br>ade married,                  | used by the a maiden, and  | Joint Debtor i<br>trade names)   | in the last 8 years   |  |   |   |
| (if more than xxx-xx-5  | one, state all)   | )   | vidual-Taxpa   |  |   | Complete E                                  | (if mo   | four digits of the four digits o | state all)  | r Individual-T   | Taxpayer I.D. (ITIN) N  | o./Complete EIN                             |
| Street Addre<br>1634 16<br># 4  |   | or (No. and   | Street, City, a  | and State)   | :   |   | 13<br>Sa   | t Address of<br>04 11th A<br>int Cloud,  | ve So   | r (No. and Str   | eet, City, and State):  |   |
| Saint Clo   | •   |   |  |  |   | ZIP Code<br>56304                           |  | . CD 11  | C .1  | D: : 1 DI  | (D)   | ZIP Code 56301                              |
| County of R Benton  | desidence or  | of the Prin   | cipal Place of   | f Business   | S:  |   |  | ty of Reside   | ence or of the  | Principal Pla  | ace of Business:  |   |
| Mailing Add   | dress of Del  | otor (if diffe  | rent from str  | eet addres   | ss):  |   | Maili  | ng Address   | of Joint Deb  | tor (if differer   | nt from street address):  | :   |
|   |   |   |  |  | _   | ZIP Code                                    |  |  |   |  |   | ZIP Code                                    |
| Location of (if different   |   |   | siness Debtor<br>ve):  |  |   |   |  |  |   |  |   |   |
| Type of Debtor (Form of Organization) (Check one box)  Individual (includes Joint Debtors) See Exhibit D on page 2 of this form.  Corporation (includes LLC and LLP)  Partnership  Other (If debtor is not one of the above entities, check this box and state type of entity below.) |   |   | Sing in 1 Rail Stoc  | (Check lth Care Bu gle Asset Ro 1 U.S.C. § road ekbroker modity Bru ring Bank er  Tax-Exe (Check bottor is a tax- er Title 26 of | eal Estate as<br>101 (51B)                    | e)<br>anization<br>d States                 | Chapter 11 of a Foreign Main Proceeding  Chapter 12 Chapter 15 Petition for Recognit of a Foreign Nonmain Proceedir  Nature of Debts (Check one box)  Debts are primarily consumer debts, Debts are primarily consumer debts, business debte consumer debte of the consu |  |   | Recognition eding Recognition roceeding  |   |   |
| attach signis unable  | ee to be paid<br>gned applice<br>to pay fee<br>ee waiver re | ched  d in installmation for the except in inequested (ap | ee (Check or<br>ments (applica<br>e court's cons<br>stallments. R<br>aplicable to cl<br>e court's cons | able to ind<br>ideration<br>Rule 1006<br>hapter 7 in   | certifying t<br>(b). See Offi<br>ndividuals o | hat the debt<br>cial Form 3A<br>only). Must | Chec   | Debtor is k if: Debtor's to insider k all applical A plan is Acceptan  | a small busin<br>not a small b<br>aggregate not<br>s or affiliates;<br>able boxes:<br>being filed w<br>ces of the pla | ncontingent li<br>ncontingent li<br>nconti | defined in 11 U.S.C. or as defined in 11 U.S quidated debts (exclude \$2,190,000. | .C. § 101(51D). ling debts owed  ne or more |
| Debtor e  | estimates that<br>estimates that                            | at funds will<br>at, after any                            | ation be available exempt prop   | erty is ex   | cluded and                                    | administrat                                 |  |  |   |  | SPACE IS FOR COURT  |   |
| Estimated N  1- 49  | Tumber of C  50- 99   | reditors  100- 199  | 200-   | 1,000-<br>5,000  | 5,001-<br>10,000                              | 10,001-<br>25,000                           | 25,001-<br>50,000  | 50,001-<br>100,000   | OVER 100,000  |  |   |   |
| Estimated A  So to \$50,000   | \$50,001 to<br>\$100,000                                    | \$100,001 to<br>\$500,000                                 | \$500,001<br>to \$1  | \$1,000,001<br>to \$10<br>million  | \$10,000,001<br>to \$50<br>million            | \$50,000,001<br>to \$100<br>million         | \$100,000,00<br>to \$500<br>million  | 1 \$500,000,001<br>to \$1 billion  |   |  |   |   |
| Estimated Li  \$0 to \$50,000   | \$50,001 to \$100,000                                       | \$100,001 to<br>\$500,000                                 | \$500,001<br>to \$1  | \$1,000,001<br>to \$10<br>million  | \$10,000,001<br>to \$50<br>million            | \$50,000,001<br>to \$100<br>million         |  |  |   |  |   |   |

3/27/10 12:30AM B1 (Official Form 1)(1/08) Page 2 Name of Debtor(s): Voluntary Petition Thibodeau, Michael Darwin Thibodeau, Corinne Denise (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Case Number: Location Date Filed: Where Filed: - None -Location Case Number: Date Filed: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. X /s/ Michael G. Blee March 27, 2010 Signature of Attorney for Debtor(s) (Date) Michael G. Blee Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ■ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and

Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period

Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

after the filing of the petition.

B1 (Official Form 1)(1/08) Page 3

# **Voluntary Petition**

(This page must be completed and filed in every case)

### Signatures

### Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Michael Darwin Thibodeau

Signature of Debtor Michael Darwin Thibodeau

X /s/ Corinne Denise Thibodeau

Signature of Joint Debtor Corinne Denise Thibodeau

Telephone Number (If not represented by attorney)

March 27, 2010

Date

### Signature of Attorney\*

X /s/ Michael G. Blee

Signature of Attorney for Debtor(s)

Michael G. Blee 135367

Printed Name of Attorney for Debtor(s)

Blee Law Office, Ltd

Firm Name

14 North 7th Ave

Ste 117

St Cloud, MN 56303

Address

Email: bleelawoffice@charter.net

320/253-5000 Fax: 320-253-0534

Telephone Number

March 27, 2010

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

### Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

Name of Debtor(s):

Thibodeau, Michael Darwin Thibodeau, Corinne Denise

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

### Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

v

Date

Address

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

B 1D (Official Form 1, Exhibit D) (12/09)

# United States Bankruptcy Court District of Minnesota

| In re | Michael Darwin Thibodeau<br>Corinne Denise Thibodeau |           | Case No. |   |
|-------|--|-----------|----------|---|
|       |  | Debtor(s) | Chapter  | 7 |
|       |  |           |          |   |
|       |  |           |          |   |
|       |  |           |          |   |

# EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] \_\_\_\_

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

| ☐ 4. I am not required to receive a credit coun  | nseling briefing because of: [Check the applicable                     |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|
| statement.] [Must be accompanied by a motion for d   | etermination by the court.]  |  |  |  |  |  |  |
| ☐ Incapacity. (Defined in 11 U.S.C. §  | 109(h)(4) as impaired by reason of mental illness or                   |  |  |  |  |  |  |
| mental deficiency so as to be incapable of realizing and making rational decisions with respect to |  |  |  |  |  |  |  |
| financial responsibilities.);  |  |  |  |  |  |  |  |
| ☐ Disability. (Defined in 11 U.S.C. §  | 109(h)(4) as physically impaired to the extent of being                |  |  |  |  |  |  |
| unable, after reasonable effort, to participate  | in a credit counseling briefing in person, by telephone, or            |  |  |  |  |  |  |
| through the Internet.);  |  |  |  |  |  |  |  |
| ☐ Active military duty in a military co  | ombat zone.  |  |  |  |  |  |  |
| ☐ 5. The United States trustee or bankruptcy requirement of 11 U.S.C. § 109(h) does not apply in   | administrator has determined that the credit counseling this district. |  |  |  |  |  |  |
| I certify under penalty of perjury that the  | information provided above is true and correct.                        |  |  |  |  |  |  |
| Signature of Debtor:   | /s/ Michael Darwin Thibodeau   |  |  |  |  |  |  |
| _  | Michael Darwin Thibodeau   |  |  |  |  |  |  |

Date:

March 27, 2010

B 1D (Official Form 1, Exhibit D) (12/09)

# United States Bankruptcy Court District of Minnesota

| In re | Michael Darwin Thibodeau<br>Corinne Denise Thibodeau |           | Case No. |   |
|-------|--|-----------|----------|---|
|       |  | Debtor(s) | Chapter  | 7 |
|       |  |           |          |   |
|       |  |           |          |   |
|       |  |           |          |   |

# EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] \_\_\_\_

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

| ☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable  |
|---|
| statement.] [Must be accompanied by a motion for determination by the court.]   |
| ☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or  |
| mental deficiency so as to be incapable of realizing and making rational decisions with respect to  |
| financial responsibilities.);   |
| ☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being   |
| unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or   |
| through the Internet.);   |
| ☐ Active military duty in a military combat zone.   |
| ☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district. |
| I certify under penalty of perjury that the information provided above is true and correct.   |
| Signature of Debtor: /s/ Corinne Denise Thibodeau   |

Date:

March 27, 2010

Corinne Denise Thibodeau

# United States Bankruptcy Court District of Minnesota

| In re | Michael Darwin Thibodeau, |         | Case No. |   |
|-------|---------------------------|---------|----------|---|
|       | Corinne Denise Thibodeau  |         |          |   |
| _     |                           | Debtors | Chapter  | 7 |

# **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE  | ATTACHED<br>(YES/NO) | NO. OF<br>SHEETS | ASSETS            | LIABILITIES | OTHER    |
|---|----------------------|------------------|-------------------|-------------|----------|
| A - Real Property   | Yes                  | 1                | 109,800.00        |             |          |
| B - Personal Property   | Yes                  | 4                | 164,163.00        |             |          |
| C - Property Claimed as Exempt  | Yes                  | 2                |                   |             |          |
| D - Creditors Holding Secured Claims  | Yes                  | 1                |                   | 124,848.00  |          |
| E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E) | Yes                  | 1                |                   | 0.00        |          |
| F - Creditors Holding Unsecured<br>Nonpriority Claims                           | Yes                  | 4                |                   | 63,190.67   |          |
| G - Executory Contracts and<br>Unexpired Leases                                 | Yes                  | 1                |                   |             |          |
| H - Codebtors   | Yes                  | 1                |                   |             |          |
| I - Current Income of Individual<br>Debtor(s)                                   | Yes                  | 1                |                   |             | 3,815.65 |
| J - Current Expenditures of Individual Debtor(s)                                | Yes                  | 2                |                   |             | 4,074.72 |
| Total Number of Sheets of ALL Schedu  | iles                 | 18               |                   |             |          |
|   | To                   | otal Assets      | 273,963.00        |             |          |
|   |                      |                  | Total Liabilities | 188,038.67  |          |

# United States Bankruptcy Court District of Minnesota

| District of   | Minnesota   |  |                     |   |
|---|---|--|---------------------|---|
| Michael Darwin Thibodeau,<br>Corinne Denise Thibodeau   |   | Case No.                                       |                     |   |
|   | Debtors   | Chapter  | 7                   |   |
| STATISTICAL SUMMARY OF CERTAIN I  If you are an individual debtor whose debts are primarily consumer a case under chapter 7, 11 or 13, you must report all information re  Check this box if you are an individual debtor whose debts a report any information here.  This information is for statistical purposes only under 28 U.S.C Summarize the following types of liabilities, as reported in the Statistical purposes. | r debts, as defined in § 10 quested below.  The NOT primarily consusts \$159. | 01(8) of the Bankrupt<br>mer debts. You are no | cy Code (11 U.S.C.§ | - |
| Type of Liability   | Amount  |  |                     |   |
| Domestic Support Obligations (from Schedule E)  |   | 0.00   |                     |   |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)  |   | 0.00   |                     |   |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)   |   | 0.00   |                     |   |
| Student Loan Obligations (from Schedule F)  |   | 0.00   |                     |   |
| Domestic Support, Separation Agreement, and Divorce Decree<br>Obligations Not Reported on Schedule E  |   | 0.00   |                     |   |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)   |   | 0.00   |                     |   |
| TOTAL   |   | 0.00   |                     |   |
| State the following:  |   |  |                     |   |
| Average Income (from Schedule I, Line 16)   | 3,8   | 15.65  |                     |   |
| Average Expenses (from Schedule J, Line 18)   | 4,0   | 74.72  |                     |   |
| Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)  | 5,5   | 08.67  |                     |   |
| State the following:  |   |  |                     |   |
| Total from Schedule D, "UNSECURED PORTION, IF ANY" column   |   |  | 6,648.00            |   |
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column  |   | 0.00   |                     |   |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column  |   |  | 0.00                |   |
| 4. Total from Schedule F  |   |  | 63,190.67           |   |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4)  |   |  | 69,838.67           |   |

sheriff sale date 5/19/2010.

Michael Darwin Thibodeau, Corinne Denise Thibodeau

| Case No. |  |  |
|----------|--|--|
|          |  |  |

### Debtors

# **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| J 1  | 1 1 5 5                                    |   | 1 3  |                            |
|--|--|---|--|----------------------------|
| Description and Location of Property   | Nature of Debtor's<br>Interest in Property | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in<br>Property, without<br>Deducting any Secured<br>Claim or Exemption | Amount of<br>Secured Claim |
| Homestead located at 1304 11th Ave So, St Cloudd, legally described as Lot 14, Block 14, Normal Park Addition, Steams County, Minnesota, Foreclosure | Fee simple                                 | J   | 109,800.00   | 116,367.00                 |

Sub-Total > 109,800.00 (Total of this page)

Total > 109,800.00

(Report also on Summary of Schedules)

| In re | Michael Darwin Thibodeau |
|-------|--------------------------|
|       | Corinne Denise Thibodeau |

### SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

|    | Type of Property  | N O Description and Location of Property E  | Joint, or                      | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|----|---|---|--------------------------------|---|
| 1. | Cash on hand  | Cash on hand                                | J                              | 20.00   |
| 2. | Checking, savings or other financial  | US Bank checking husband                    | Н                              | 800.00  |
|    | accounts, certificates of deposit, or<br>shares in banks, savings and loan,<br>thrift, building and loan, and<br>homestead associations, or credit<br>unions, brokerage houses, or<br>cooperatives. | US Bank savings husband                     | Н                              | 13.00   |
|    |   | Great River Fed Credit Union checking wife  | W                              | 100.00  |
|    |   | Great River Fed Credit Union savings wife   | W                              | 8.00  |
| 3. | Security deposits with public utilities, telephone companies, landlords, and others.  | Northern Management Forestview Apts deposit | Н                              | 400.00  |
| 4. | Household goods and furnishings,  | Household goods & furnishings wife          | W                              | 1,000.00  |
|    | including audio, video, and computer equipment.   | Household goods & furnishings husband       | Н                              | 500.00  |
| 5. | Books, pictures and other art<br>objects, antiques, stamp, coin,<br>record, tape, compact disc, and<br>other collections or collectibles.   | CDs, DVDs wife                              | W                              | 25.00   |
| 6. | Wearing apparel.  | Clothes                                     | W                              | 200.00  |
|    |   | Clothes                                     | Н                              | 300.00  |
| 7. | Furs and jewelry.   | Wedding ring                                | Н                              | 100.00  |
|    |   | Wedding ring, necklaces, earrings           | W                              | 150.00  |
| 8. | Firearms and sports, photographic,  | Scrap booking materials                     | W                              | 100.00  |
|    | and other hobby equipment.  | Portable fish house                         | Н                              | 100.00  |
| 9. | Interests in insurance policies.<br>Name insurance company of each<br>policy and itemize surrender or<br>refund value of each.  | X   |                                |   |
|    |   |   | Sub-Total (Total of this page) | 1> 3,816.00   |

3 continuation sheets attached to the Schedule of Personal Property

| In re | Michael Darwin Thibodeau, |
|-------|---------------------------|
|       | Corinne Denise Thibodeau  |

| Case No. |
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|----------|

# **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

|     | Type of Property   | N<br>O<br>N<br>E | Description and Location of Property  | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|-----|--|------------------|---|---|---|
| 10. | Annuities. Itemize and name each issuer.   | X                |   |   |   |
| 11. | Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or   |                  | Creative Memories US Bank ESOP (Antioch)  | W   | 73,847.00   |
|     | under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) |                  | Creative Memories US Bank ESOP (Antioch)  | Н   | 75,000.00   |
| 12. | Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.  | X                |   |   |   |
| 13. | Stock and interests in incorporated and unincorporated businesses. Itemize.  |                  | Creative Memories shares, probably worthless after former employer filed for bankruptcu | Н   | 0.00  |
| 14. | Interests in partnerships or joint ventures. Itemize.  | X                |   |   |   |
| 15. | Government and corporate bonds and other negotiable and nonnegotiable instruments.   | X                |   |   |   |
| 16. | Accounts receivable.   | Χ                |   |   |   |
| 17. | Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.   | Х                |   |   |   |
| 18. | Other liquidated debts owed to debtor including tax refunds. Give particulars.   | X                |   |   |   |
| 19. | Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.       | X                |   |   |   |
| 20. | Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.   | X                |   |   |   |
|     |  |                  |   |   |   |

Sub-Total > (Total of this page)

148,847.00

Sheet 1 of 3 continuation sheets attached to the Schedule of Personal Property

| In re | Michael Darwin Thibodeau |
|-------|--------------------------|
|       | Corinne Denise Thibodeau |

| Case No. |
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|          |

# **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

|     | Type of Property  | N<br>O<br>N<br>E | Description and Location of Property          | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|-----|---|------------------|---|---|---|
| 21. | Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.  | X                |   |   |   |
| 22. | Patents, copyrights, and other intellectual property. Give particulars.   | Х                |   |   |   |
| 23. | Licenses, franchises, and other general intangibles. Give particulars.  | Х                |   |   |   |
| 24. | Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X                |   |   |   |
| 25. | Automobiles, trucks, trailers, and  | 2                | 006 Kia Spectrum, 53,000 miles                | W   | 8,400.00  |
|     | other vehicles and accessories.   | 1                | 996 Jeep Cherokee; 164,000 miles; paid \$3300 | Н   | 3,000.00  |
| 26. | Boats, motors, and accessories.   | Х                |   |   |   |
| 27. | Aircraft and accessories.   | Χ                |   |   |   |
| 28. | Office equipment, furnishings, and supplies.  | Х                |   |   |   |
| 29. | Machinery, fixtures, equipment, and supplies used in business.  | Χ                |   |   |   |
| 30. | Inventory.  | Χ                |   |   |   |
| 31. | Animals.  | D                | log & cat wife                                | W   | 0.00  |
| 32. | Crops - growing or harvested. Give particulars.   | Х                |   |   |   |
| 33. | Farming equipment and implements.   | Х                |   |   |   |
| 34. | Farm supplies, chemicals, and feed.   | Х                |   |   |   |
|     |   |                  |   |   |   |
|     |   |                  | (T)   | Sub-Total of this page)                     | al > 11,400.00  |

Sheet 2 of 3 continuation sheets attached to the Schedule of Personal Property

| In re | Michael Darwin Thibodeau, | Case No              |
|-------|---------------------------|----------------------|
|       | Corinne Denise Thibodeau  |                      |
| _     |                           | Debtors              |
|       | SCHEDIII E B              | P. PERSONAL PROPERTY |

(Continuation Sheet)

| Type of Property   | N<br>O<br>N<br>E | Description and Location of Property | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|--|------------------|--------------------------------------|---|---|
| 35. Other personal property of any kind not already listed. Itemize. | Tools            |                                      | Н   | 100.00  |

Sub-Total > 100.00 (Total of this page)

Total > 164,163.00

Sheet 3 of 3 continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

| -   | • |    |
|-----|---|----|
|     | n | ra |
| - 1 |   | 10 |

Michael Darwin Thibodeau, Corinne Denise Thibodeau

| Case No. |  |
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|          |  |

# Debtors

# SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

| Debtor claims the exemptions to which debtor is entitled under: | Check if debtor claims a homestead exemption that exceed |
|---|--|
| (Check one box)   | \$136,875.   |

■ 11 U.S.C. §522(b)(2)
□ 11 U.S.C. §522(b)(3)

| Description of Property  | Specify Law Providing<br>Each Exemption         | Value of<br>Claimed<br>Exemption | Current Value of<br>Property Without<br>Deducting Exemption |
|--|---|----------------------------------|---|
| Real Property Homestead located at 1304 11th Ave So, St Clouod, legally described as Lot 14, Block 14, Normal Park Addition, Stearns County, Minnesota. Foreclosure sheriff sale date 5/19/2010. | 11 U.S.C. § 522(d)(1)                           | 0.00                             | 109,800.00  |
| Cash on Hand<br>Cash on hand   | 11 U.S.C. § 522(d)(5)                           | 20.00                            | 20.00   |
| Checking, Savings, or Other Financial Accounts, Certif US Bank checking husband  | ricates of Deposit<br>11 U.S.C. § 522(d)(5)     | 800.00                           | 800.00  |
| US Bank savings husband  | 11 U.S.C. § 522(d)(5)                           | 13.00                            | 13.00   |
| Great River Fed Credit Union checking wife   | 11 U.S.C. § 522(d)(5)                           | 100.00                           | 100.00  |
| Great River Fed Credit Union savings wife  | 11 U.S.C. § 522(d)(5)                           | 8.00                             | 8.00  |
| Security Deposits with Utilities, Landlords, and Others<br>Northern Management Forestview Apts deposit   | 11 U.S.C. § 522(d)(5)                           | 400.00                           | 400.00  |
| Household Goods and Furnishings<br>Household goods & furnishings wife  | 11 U.S.C. § 522(d)(3)                           | 1,000.00                         | 1,000.00  |
| Household goods & furnishings husband  | 11 U.S.C. § 522(d)(3)                           | 500.00                           | 500.00  |
| Books, Pictures and Other Art Objects; Collectibles CDs, DVDs wife   | 11 U.S.C. § 522(d)(5)                           | 25.00                            | 25.00   |
| Wearing Apparel Clothes  | 11 U.S.C. § 522(d)(3)                           | 200.00                           | 200.00  |
| Clothes  | 11 U.S.C. § 522(d)(3)                           | 300.00                           | 300.00  |
| <u>Furs and Jewelry</u><br>Wedding ring  | 11 U.S.C. § 522(d)(4)                           | 100.00                           | 100.00  |
| Wedding ring, necklaces, earrings  | 11 U.S.C. § 522(d)(4)                           | 150.00                           | 150.00  |
| Firearms and Sports, Photographic and Other Hobby E<br>Scrap booking materials   | Equipment<br>11 U.S.C. § 522(d)(5)              | 100.00                           | 100.00  |
| Portable fish house  | 11 U.S.C. § 522(d)(5)                           | 100.00                           | 100.00  |
| Interests in an Education IRA or under a Qualified State Creative Memories US Bank ESOP (Antioch)  | <u>e Tuition Plan</u><br>11 U.S.C. § 522(d)(12) | 73,847.00                        | 73,847.00   |
| Creative Memories US Bank ESOP (Antioch)   | 11 U.S.C. § 522(d)(12)                          | 75,000.00                        | 75,000.00   |

<sup>1</sup> continuation sheets attached to Schedule of Property Claimed as Exempt

| In re | Michael Darwin Thibodeau |
|-------|--------------------------|
|       | Corinne Denise Thibodeau |

| Case No. |
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# SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

(Continuation Sheet)

| Description of Property   | Specify Law Providing<br>Each Exemption | Value of<br>Claimed<br>Exemption | Current Value of<br>Property Without<br>Deducting Exemption |
|---|---|----------------------------------|---|
| Stock and Interests in Businesses Creative Memories shares, probably worthless after former employer filed for bankruptcu | 11 U.S.C. § 522(d)(5)                   | 0.00                             | 0.00  |
| Automobiles, Trucks, Trailers, and Other Vehicles<br>2006 Kia Spectrum, 53,000 miles                                      | 11 U.S.C. § 522(d)(2)                   | 0.00                             | 8,400.00  |
| 1996 Jeep Cherokee; 164,000 miles; paid \$3300  | 11 U.S.C. § 522(d)(2)                   | 3,000.00                         | 3,000.00  |
| Animals<br>Dog & cat wife   | 11 U.S.C. § 522(d)(5)                   | 0.00                             | 0.00  |
| Other Personal Property of Any Kind Not Already Lister Tools  | e <u>d</u><br>11 U.S.C. § 522(d)(5)     | 100.00                           | 100.00  |

Total: 155,763.00 273,963.00

| In re | Michael Darwin Thibodeau, |
|-------|---------------------------|
|       | Corinne Denise Thibodeau  |

| Case No. |  |
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# SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Unliquidated". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

|  | Ç   | Hu          | sband, Wife, Joint, or Community   | CO              | U<br>N      | D                     | AMOUNT OF   |                                 |
|--|---|-------------|--|-----------------|-------------|-----------------------|---|---------------------------------|
| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B T O R                                   | C<br>A<br>M | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN   | 0 N T _ N G E N | NLIQUIDAT   | S<br>P<br>U<br>T<br>E | CLAIM<br>WITHOUT<br>DEDUCTING<br>VALUE OF<br>COLLATERAL | UNSECURED<br>PORTION, IF<br>ANY |
| Account No.  |   |             | Purchase Money Security  | T               | T<br>E<br>D |                       |   |                                 |
| Members Co-op Credit Unioin<br>101 14th St<br>Cloquet, MN 55720                                      |   | J           | 2006 Kia Spectrum, 53,000 miles  |                 | U           |                       |   |                                 |
|  |   |             | Value \$ 8,400.00  |                 |             |                       | 8,481.00  | 81.00                           |
| Account No. xxxxx2435  PHH Mortgage Services PO Box 5452  Mount Laurel, NJ 08054-5452                |   | J           | 7/7/06 First Mortgage Homestead located at 1304 11th Ave So, St Clouod, legally described as Lot 14, Block 14, Normal Park Addition, Stearns County, Minnesota. Foreclosure sheriff sale date 5/19/2010.                       |                 |             |                       |   |                                 |
|  |   |             | Value \$ 109,800.00  | 1               |             |                       | 103,966.00  | 0.00                            |
| Account No. xxx-xx0-901  US Bank 1015 W St Germain Saint Cloud, MN 56301                             | -   | J           | 7/7/06 Second Mortgage Homestead located at 1304 11th Ave So, St Clouod, legally described as Lot 14, Block 14, Normal Park Addition, Stearns County, Minnesota. Foreclosure sheriff sale date 5/19/2010.  Value \$ 109,800.00 |                 |             |                       | 12,401.00   | 6,567.00                        |
| Account No.  | t   | T           | 100,000.00   | Н               |             |                       | 12,101.00   | 0,001.00                        |
|  |   |             | Value \$   |                 |             |                       |   |                                 |
| _0 continuation sheets attached  | Subtotal (Total of this page) 124,848.00 6,648.00 |             |  | 6,648.00        |             |                       |   |                                 |
| Total 124,848.00 6,648.00 (Report on Summary of Schedules)   |   |             |  | 6,648.00        |             |                       |   |                                 |

| In re | Michael Darwin Thibodeau, |  |
|-------|---------------------------|--|
|       | Corinne Denise Thibodeau  |  |

| Case No | D |  |
|---------|---|--|
|         |   |  |

# SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

| ■ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.   |
|---|
| TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)   |
| Domestic support obligations  Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relate of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).   |
| ☐ Extensions of credit in an involuntary case   |
| Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of trustee or the order for relief. $11 \text{ U.S.C.} \$ 507(a)(3)$ .   |
| ☐ Wages, salaries, and commissions  |
| Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sale representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). |
| ☐ Contributions to employee benefit plans   |
| Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).   |
| ☐ Certain farmers and fishermen   |
| Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).  |
| ☐ Deposits by individuals   |
| Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).  |
| ☐ Taxes and certain other debts owed to governmental units  |
| Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).   |
| ☐ Commitments to maintain the capital of an insured depository institution  |
| Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Feder Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).  |
| Claims for death or personal injury while debtor was intoxicated  Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance 11 U.S.C. 8 507(a)(10)  |

0 continuation sheets attached

<sup>\*</sup> Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

| In re | Michael Darwin Thibodeau,<br>Corinne Denise Thibodeau | Case No.      |
|-------|---|---------------|
|       | Debtors   | <del></del> , |

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER | СОДШВ       | Hu<br>H<br>W | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | C O N T I | I N I                 | D I S P U T | - 1       | AMOUNT OF CLAIM |
|--|-------------|--------------|---|-----------|-----------------------|-------------|-----------|-----------------|
| (See instructions above.)  | T<br>O<br>R | C            | IS SUBJECT TO SETOFF, SO STATE.   | NGEN      | U<br>I<br>D<br>A<br>T | E<br>D      | :         | AMOUNT OF CLAIM |
| Account No. xxxx xxxx 1795   |             |              |   | T         | T<br>E<br>D           |             |           |                 |
| Best Buy<br>PO Box 15524<br>Wilmington, DE 19850-5524                            |             | w            |   |           |                       |             |           | 1,809.00        |
| Account No. xxxxxxxxxx2183   |             |              |   |           | Н                     | r           | $\dagger$ |                 |
| Capital One<br>PO Box 105474<br>Atlanta, GA 30348                                |             | J            |   |           |                       |             |           | 18,667.47       |
| Account No. xx1753; xx0172   |             |              | medical; JC Christensen & Assoc   |           | Н                     |             | +         | 10,007.17       |
| CentraCare Clinic<br>1200 6th Ave No<br>Saint Cloud, MN 56303-2736               |             | J            |   |           |                       |             |           |                 |
|  |             | L            |   |           | Ц                     | L           | 4         | 1,582.74        |
| Account No. xxxx xxxx xxxx 0204  Citi Cards PO Box 6000 The Lakes, NV 89163-6000 |             | J            |   |           |                       |             |           | 3,536.93        |
|  |             | 上            |   | libt      | total                 | L           | +         |                 |
| 3 continuation sheets attached   |             |              | (Total of t   |           |                       |             | , [       | 25,596.14       |

| In re | Michael Darwin Thibodeau, | Case N | lo |
|-------|---------------------------|--------|----|
|       | Corinne Denise Thibodeau  |        |    |

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

|   | _        | _ |             |   |           |        | _   | _         |                 |
|---|----------|---|-------------|---|-----------|--------|-----|-----------|-----------------|
| CREDITOR'S NAME,  | C        | H | Hus         | band, Wife, Joint, or Community   | Č         | Ü      | ļ   | )         |                 |
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)                  | CODEBTOR | 1 | C<br>A<br>M | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGEN | Q<br>U |     |           | AMOUNT OF CLAIM |
| Account No. xxxx xxxx xxxx xxxx 3074  |          |   |             |   | T         | E<br>D |     |           |                 |
| Discover<br>PO Box 6103<br>Carol Stream, IL 60197-6103  |          |   | Н           |   |           | D      |     |           | 3,032.12        |
| Account No. xxxxxx-xxx-4855   |          | T |             |   |           |        |     | T         |                 |
| Fashion Bug<br>PO Box 659450<br>San Antonio, TX 78265-9450  |          | \ | W           |   |           |        |     |           | 284.29          |
| Account No.   | ╁        | + | Н           |   |           |        | +   | +         |                 |
| Great Lakes Medical Billing<br>PO Box 9<br>Crosslake, MN 56442                                    |          | \ | W           |   |           |        |     |           | 358.00          |
| Account No. 174   |          | T |             |   |           |        | Ī   | 1         |                 |
| Great River Fed Credit Union<br>1532 West St Germain<br>PO Box 1208<br>Saint Cloud, MN 56302-1208 |          |   | J           |   |           |        |     |           | 148.00          |
| Account No. xxx-xxx-x21-11  | t        | t | $\forall$   |   |           |        | t   | $\dagger$ |                 |
| JC Penney<br>PO Box 960090<br>Orlando, FL 32896-0090  |          |   | W           |   |           |        |     |           | 1,163.71        |
| Sheet no1 of _3 sheets attached to Schedule of  |          | _ |             | 5   | Subt      | ota    | ıl  | 7         |                 |
| Creditors Holding Unsecured Nonpriority Claims  |          |   |             | (Total of t   | his       | nag    | ze) | ١         | 4,986.12        |

| In re | Michael Darwin Thibodeau, | Case No |
|-------|---------------------------|---------|
|       | Corinne Denise Thibodeau  |         |

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

|   | _        |             |   |            | _            |        |                 |
|---|----------|-------------|---|------------|--------------|--------|-----------------|
| CREDITOR'S NAME,  | C        | H           | lusband, Wife, Joint, or Community                            | C          | U            | D      |                 |
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)                | CODEBTOR | F<br>V<br>J | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM | CONTINGENT | DZL_QU_DAHED | SPUTED | AMOUNT OF CLAIM |
| Account No. xxxx5580  |          |             |   | T          | E            |        |                 |
| Kohls<br>PO Box 3115<br>Milwaukee, WI 53201-3115  |          | ٧           | V   |            | D            |        | 986.00          |
| Account No.   |          | t           |   |            |              |        |                 |
| River City Dental<br>1201 Maine Prairie Rd<br>Saint Cloud, MN 56301                             |          | ٧           | v   |            |              |        | 00.00           |
|   |          | L           |   |            |              |        | 22.96           |
| Account No. xxxx xxxx xxxx 7654   |          |             | Citibank  |            |              |        |                 |
| Sears Credit Cards<br>PO Box 688957<br>Des Moines, IA 50368-8957                                |          | ٧           | V   |            |              |        |                 |
|   |          |             |   |            |              |        | 584.45          |
| Account No.   |          |             |   |            |              |        |                 |
| Victoria's Secret<br>PO Box 182117<br>Columbus, OH 43218  |          | ٧           | V   |            |              |        | 35.00           |
|   | _        | ļ           |   |            |              |        | 35.00           |
| Account No. xxxxxxxxx8038  Wells Fargo Educ Financial Svc 301 E 58th St N Sioux Falls, SD 57104 |          | W           | wife's student loans  |            |              |        | 30,193.00       |
| Sheet no. 2 of 3 sheets attached to Schedule of   |          | L           |   | Sub        | oto          | 1      |                 |
| Creditors Holding Unsecured Nonpriority Claims  |          |             | (Total of t   |            |              |        | 31,821.41       |

| In re | Michael Darwin Thibodeau, | Case No. |
|-------|---------------------------|----------|
| _     | Corinne Denise Thibodeau  |          |

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| CREDITOR'S NAME,   | C        | Hu          | sband, Wife, Joint, or Community  | Č             | Ü            | P      |                 |
|--|----------|-------------|---|---------------|--------------|--------|-----------------|
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)  Account No.                | CODEBTOR | C<br>A<br>M | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTLNGENT    | UNLIGUIDATED | SPUTED | AMOUNT OF CLAIM |
| Account No.  | 1        |             |   |               | E            |        |                 |
| Wells Fargo FinancialNatl Bank<br>PO Box 94498<br>Las Vegas, NV 89193-4498                                   |          | J           |   |               |              |        |                 |
|  |          |             |   |               |              |        | 787.00          |
| Account No.  | 1        |             |   | Г             |              |        |                 |
|  |          |             |   |               |              |        |                 |
|  |          |             |   |               |              |        |                 |
|  |          |             |   |               |              |        |                 |
| Account No.  |          |             |   |               |              |        |                 |
|  |          |             |   |               |              |        |                 |
|  |          |             |   |               |              |        |                 |
|  |          |             |   |               |              |        |                 |
|  |          |             |   |               |              |        |                 |
| Account No.  | t        |             |   |               |              | t      |                 |
|  | 1        |             |   |               |              |        |                 |
|  |          |             |   |               |              |        |                 |
|  |          |             |   |               |              |        |                 |
|  |          |             |   |               |              |        |                 |
|  | L        |             |   |               |              | L      |                 |
| Account No.  |          |             |   |               |              |        |                 |
|  |          |             |   |               |              |        |                 |
|  |          |             |   |               |              |        |                 |
|  |          |             |   |               |              |        |                 |
|  |          |             |   |               |              |        |                 |
|  |          |             |   |               | Ļ            | Ļ      |                 |
| Sheet no. <u>3</u> of <u>3</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims |          |             | (Total of t   | Subt<br>his 1 |              |        | 787.00          |
| Totaling Charles Tromphorny Chamb  |          |             | (1041)  |               | ota          |        |                 |
|  |          |             | (Report on Summary of Sc  |               |              |        | 63,190.67       |

| •     |                           |         |         |
|-------|---------------------------|---------|---------|
| In re | Michael Darwin Thibodeau, | C       | Case No |
|       | Corinne Denise Thibodeau  |         |         |
| _     |                           | Debtors |         |

# SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. B6H (Official Form 6H) (12/07)

| In re | Michael Darwin Thibodeau, | Case No |  |
|-------|---------------------------|---------|--|
|       | Corinne Denise Thibodeau  |         |  |
| _     |                           | Debtors |  |

**SCHEDULE H - CODEBTORS** 

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

| In re Corinne Denise Thibodeau Case No. |  |
|---|--|

Debtor(s)

# SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

| Debtor's Marital Status:                                | DEPE  | NDENTS OF DEBTOR AN   | ID SPOUSE          |                |          |
|---|---|-----------------------|--------------------|----------------|----------|
|   | RELATIONSHIP(S):                                | AGE                   | E(S):              |                |          |
| Separated   | Daughter  |                       | 11                 |                |          |
| Employment:   | DEBTOR  |                       | SPOUSE             |                |          |
| Occupation  |   |                       |                    |                |          |
| Name of Employer  | Spee Dee Delivery                               | Paynesvill            | e Area Health Care | System         | 1        |
| How long employed                                       | ,   |                       |                    |                |          |
| Address of Employer                                     | 4101 Clearwater Rd                              | 200 1st St            | W                  |                |          |
| 1 2   | Saint Cloud, MN 56301                           | Paynesvill            | e, MN 56362        |                |          |
| INCOME: (Estimate of average                            | or projected monthly income at time case filed  | )                     | DEBTOR             |                | SPOUSE   |
| 1. Monthly gross wages, salary, a                       | and commissions (Prorate if not paid monthly)   |                       | \$ 2,699.67        | \$             | 2,002.00 |
| 2. Estimate monthly overtime                            |   |                       | \$ 361.83          | \$             | 0.00     |
| 3. SUBTOTAL   |   |                       | \$ 3,061.50        | \$             | 2,002.00 |
| 4. LESS PAYROLL DEDUCTION                               | OME   | -                     |                    |                |          |
| a. Payroll taxes and social s                           |   |                       | \$ 470.17          | \$             | 170.47   |
| b. Insurance  | security  |                       | \$ 487.09          | \$ <del></del> | 0.00     |
| c. Union dues   |   |                       | \$ 0.00            | \$ <del></del> | 0.00     |
|   | ERA   |                       | \$ 0.00            | \$ <del></del> | 120.12   |
| u. Other (Specify).                                     |   |                       | \$ 0.00            | \$ <del></del> | 0.00     |
|   |   |                       | <u> </u>           | Ψ              | 0.00     |
| 5. SUBTOTAL OF PAYROLL I                                | DEDUCTIONS                                      |                       | \$ 957.26          | \$             | 290.59   |
| 6. TOTAL NET MONTHLY TA                                 | KE HOME PAY                                     |                       | \$ 2,104.24        | \$             | 1,711.41 |
| 7. Regular income from operatio                         | n of business or profession or farm (Attach det | ailed statement)      | \$ 0.00            | \$             | 0.00     |
| 8. Income from real property                            |   |                       | \$ 0.00            | \$             | 0.00     |
| 9. Interest and dividends                               |   |                       | \$ 0.00            | \$             | 0.00     |
| 10. Alimony, maintenance or sup dependents listed above | pport payments payable to the debtor for the de | otor's use or that of | \$ 0.00            | \$             | 0.00     |
| 11. Social security or government                       | nt assistance                                   |                       | <u> </u>           | _              |          |
| (C:f).  |   |                       | \$ 0.00            | \$             | 0.00     |
|   |   |                       | \$ 0.00            | \$             | 0.00     |
| 12. Pension or retirement income                        |   |                       | \$ 0.00            | \$             | 0.00     |
| 13. Other monthly income                                |   |                       |                    |                |          |
| (Specify):  |   |                       | \$ 0.00            | \$             | 0.00     |
|   |   |                       | \$ 0.00            | \$             | 0.00     |
| 14. SUBTOTAL OF LINES 7 T                               | HROUGH 13                                       |                       | \$ 0.00            | \$             | 0.00     |
| 15. AVERAGE MONTHLY INC                                 | COME (Add amounts shown on lines 6 and 14)      |                       | \$ 2,104.24        | \$             | 1,711.41 |
| 16. COMBINED AVERAGE M                                  | ONTHLY INCOME: (Combine column totals a         | From line 15)         | \$                 | 3,815          | .65      |

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

<sup>17.</sup> Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

| In re | Michael Darwin Thibodeau<br>Corinne Denise Thibodeau |           | Case No. |  |
|-------|--|-----------|----------|--|
|       |  | Debtor(s) |          |  |

# SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

| 1. Rent or home mortgage payment (include lot rented for mobile home)  | \$             | 465.00    |
|--|----------------|-----------|
| a. Are real estate taxes included? Yes No _X_  |                |           |
| b. Is property insurance included? Yes No X  |                |           |
| 2. Utilities: a. Electricity and heating fuel  | \$             | 41.44     |
| b. Water and sewer   | \$             | 0.00      |
| c. Telephone   | \$             | 68.00     |
| d. Other cable/internet  | \$             | 86.00     |
| 3. Home maintenance (repairs and upkeep)   | \$             | 0.00      |
| 4. Food  | \$             | 300.00    |
| 5. Clothing  | \$             | 20.00     |
| 6. Laundry and dry cleaning  | \$             | 25.00     |
| 7. Medical and dental expenses   | \$             | 50.00     |
| 8. Transportation (not including car payments)   | \$             | 120.00    |
| 9. Recreation, clubs and entertainment, newspapers, magazines, etc.  | \$             | 0.00      |
| 10. Charitable contributions   | \$             | 0.00      |
| 11. Insurance (not deducted from wages or included in home mortgage payments)  |                |           |
| a. Homeowner's or renter's   | \$             | 0.00      |
| b. Life  | \$             | 0.00      |
| c. Health  | \$             | 0.00      |
| d. Auto  | \$             | 105.78    |
| e. Other   | \$             | 0.00      |
| 12. Taxes (not deducted from wages or included in home mortgage payments)  |                |           |
| (Specify)  | \$             | 0.00      |
| 13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the   | · <del></del>  |           |
| plan)  |                |           |
| a. Auto  | \$             | 0.00      |
| b. Other   | \$ <del></del> | 0.00      |
| c. Other   | \$             | 0.00      |
| 14. Alimony, maintenance, and support paid to others   | \$             | 0.00      |
| 15. Payments for support of additional dependents not living at your home  | \$             | 0.00      |
| 16. Regular expenses from operation of business, profession, or farm (attach detailed statement)   | \$             | 0.00      |
| 17 Others Doughter's lessons   | \$             | 42.00     |
| Other Daughter's lessons   | \$             | 0.00      |
| Oulci  | Ψ              | 0.00      |
| 18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.) | \$             | 1,323.22  |
| 19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year  |                |           |
| following the filing of this document:   |                |           |
| tono ming the firming of this document.  |                |           |
| 20. STATEMENT OF MONTHLY NET INCOME  | -              |           |
|  | ф              | 2 04 5 05 |
| a. Average monthly income from Line 15 of Schedule I   | \$             | 3,815.65  |
| b. Average monthly expenses from Line 18 above   | ž              | 4,074.72  |
| c. Monthly net income (a. minus b.)  | <b>3</b>       | -259.07   |

filing of this document:

Debtor(s)

# SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

(Spouse's Schedule)

| 1. Rent or home mortgage payment (include lot rented for mobile home)  | \$<br>990.00   |
|--|----------------|
| a. Are real estate taxes included? Yes No _X_  |                |
| b. Is property insurance included? Yes No _X_  |                |
| 2. Utilities: a. Electricity and heating fuel  | \$<br>200.00   |
| b. Water and sewer   | \$<br>63.50    |
| c. Telephone   | \$<br>150.00   |
| d. Other Charter TV & internet   | \$<br>89.00    |
| 3. Home maintenance (repairs and upkeep)   | \$<br>0.00     |
| 4. Food  | \$<br>600.00   |
| 5. Clothing  | \$<br>50.00    |
| 6. Laundry and dry cleaning  | \$<br>10.00    |
| 7. Medical and dental expenses   | \$<br>50.00    |
| 8. Transportation (not including car payments)   | \$<br>160.00   |
| 9. Recreation, clubs and entertainment, newspapers, magazines, etc.  | \$<br>100.00   |
| 10. Charitable contributions   | \$<br>4.00     |
| 11. Insurance (not deducted from wages or included in home mortgage payments)  |                |
| a. Homeowner's or renter's   | \$<br>0.00     |
| b. Life  | \$<br>0.00     |
| c. Health  | \$<br>0.00     |
| d. Auto  | \$<br>100.00   |
| e. Other   | \$<br>0.00     |
| 12. Taxes (not deducted from wages or included in home mortgage payments)  |                |
| (Specify)  | \$<br>0.00     |
| 13. Installment payments: (In chapter 12 and 13 cases, do not list payments to be included in the plan.)   |                |
| a. Auto  | \$<br>185.00   |
| b. Other   | \$<br>0.00     |
| c. Other   | \$<br>0.00     |
| 14. Alimony, maintenance, and support paid to others   | \$<br>0.00     |
| 15. Payments for support of additional dependents not living at your home  | \$<br>0.00     |
| 16. Regular expenses from operation of business, profession, or farm (attach detailed statement)   | \$<br>0.00     |
| 17. Other  | \$<br>0.00     |
| Other  | \$<br>0.00     |
| 18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.) | \$<br>2,751.50 |
| 10. Describe any increase or decrease in expanditures anticipated to occur within the year following the   |                |

# **United States Bankruptcy Court**District of Minnesota

| In re | Michael Darwin Thibodeau<br>Corinne Denise Thibodeau |           | Case No. |   |
|-------|--|-----------|----------|---|
|       |  | Debtor(s) | Chapter  | 7 |
|       |  |           |          |   |

# DECLARATION CONCERNING DEBTOR'S SCHEDULES

### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

|      | I declare under penalty of perjury the sheets, and that they are true and correct to the |           | ad the foregoing summary and schedules, consisting of _y knowledge, information, and belief. | 20 |
|------|--|-----------|--|----|
| Date | March 27, 2010   | Signature | /s/ Michael Darwin Thibodeau  Michael Darwin Thibodeau  Debtor                               |    |
| Date | March 27, 2010   | Signature | /s/ Corinne Denise Thibodeau Corinne Denise Thibodeau Joint Debtor                           |    |

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

# United States Bankruptcy Court District of Minnesota

|       | Michael Darwin Thibodeau |           |          |   |
|-------|--------------------------|-----------|----------|---|
| In re | Corinne Denise Thibodeau |           | Case No. |   |
|       |                          | Debtor(s) | Chapter  | 7 |
|       |                          |           |          |   |

### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

### 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| AMOUNT<br>\$8,997.30 | SOURCE<br>SpeeDee, husband, 2010 ytd                   |
|----------------------|--|
| \$5,110.00           | Paynesville Area Health Care System, wife, ytd 3/12/10 |
| \$8,991.50           | Paynesville Area Health Care System, wife, 2009        |
| \$26,903.00          | SpeeDee, husband, 2009 estimated                       |

### 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

**SOURCE** 

#### 3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts*. List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR Capital One PO Box 60067 City Of Industry, CA 91716-0067 DATES OF PAYMENTS Jan, Feb 2010

AMOUNT PAID

AMOUNT STILL OWING \$0.00

\$652.06 \$0.00

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATES OF PAYMENTS/ TRANSFERS AMOUNT PAID OR VALUE OF TRANSFERS

AMOUNT STILL OWING

NAME AND ADDRESS OF CREDITOR

None

c. All debtors: List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL OWING

### 4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER

NATURE OF PROCEEDING

COURT OR AGENCY AND LOCATION STATUS OR DISPOSITION

N---- 1 T

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

3

### 5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER Shapiro Nordmeyer & Zielke 7300 Metro Blvd. Ste 390 Edina, MN 55439-2306

DATE OF REPOSSESSION. FORECLOSURE SALE. TRANSFER OR RETURN 5/19/2010

DESCRIPTION AND VALUE OF **PROPERTY** 

Residence

### 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN

NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER

DESCRIPTION AND VALUE OF

**PROPERTY** 

### 7. Gifts

None

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

### 8. Losses

None

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

4

### 9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE Blee Law Office, Ltd 14 North 7th Ave Ste 117 St Cloud, MN 56303 DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY
\$1,301.00

### 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

RELATIONSHIP TO DEBTOR DATE
Andrea Benjamin 10/17/09

19747 364th Ln McGregor, MN 55760 DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

1993 Pontiac; \$150.00

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

TRANSFER(S) IN PROPERTY

### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

### 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS DATE OF TRANSFER OR SURRENDER, IF ANY

# 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

### 14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

#### 15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF

ENVIRONMENTAL

NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS

NAME AND ADDRESS OF

DATE OF

**ENVIRONMENTAL** 

GOVERNMENTAL UNIT NOTICE LAW

None (

e c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

### 18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

NATURE OF BUSINESS

BEGINNING AND ENDING DATES

NAME

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

### 19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

### NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME

ADDRESS

DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRESS

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS

DATE ISSUED

#### 20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

None b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY

### 21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

### 22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME ADDRESS DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** 

immediately preceding the commencement of this case.

NAME AND ADDRESS TITLE DATE OF TERMINATION

### 23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

### 24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

### NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

### 25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

## DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

| Date | March 27, 2010 | Signature | /s/ Michael Darwin Thibodeau |  |
|------|----------------|-----------|------------------------------|--|
|      |                |           | Michael Darwin Thibodeau     |  |
|      |                |           | Debtor                       |  |
| Date | March 27, 2010 | Signature | /s/ Corinne Denise Thibodeau |  |
|      | <u> </u>       | -         | Corinne Denise Thibodeau     |  |
|      |                |           | Joint Debtor                 |  |

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

B8 (Form 8) (12/08)

## United States Bankruptcy Court District of Minnesota

| In re | Michael Darwin Thibodea<br>Corinne Denise Thibodea |                                 | Case No. |   |  |
|-------|--|---------------------------------|----------|---|--|
|       |  | Debtor(s)                       | Chapter  | 7 |  |
|       |  | R 7 INDIVIDUAL DEBTOR'S STATEME |          |   |  |

**PART A -** Debts secured by property of the estate. (Part A must be fully completed for **EACH** debt which is secured by property of the estate. Attach additional pages if necessary.)

| Property No. 1  |                   |  |  |
|---|-------------------|--|--|
| Creditor's Name:<br>Members Co-op Credit Unioin                   |                   | Describe Property Securing Debt: 2006 Kia Spectrum, 53,000 miles |  |
| Property will be (check one):                                     |                   |  |  |
| ☐ Surrendered   | ■ Retained        |  |  |
| If retaining the property, I intend to (che ☐ Redeem the property | ck at least one): |  |  |
| Reaffirm the debt   |                   |  |  |
| ☐ Other. Explain  | (for example, avo | oid lien using 11 U.S.C. § 522(f)).                              |  |
| Property is (check one):  |                   |  |  |
| ■ Claimed as Exempt   |                   | ☐ Not claimed as exempt  |  |

| B8 (Form 8) (12/08)  |                    | <u></u>  | Page 2   |
|--|--------------------|--|--|
| Property No. 2   |                    |  |  |
| Creditor's Name: PHH Mortgage Services   |                    | described as Lot 14, I   | ecuring Debt:<br>t 1304 11th Ave So, St Clouod, legally<br>Block 14, Normal Park Addition, Stearns<br>Foreclosure sheriff sale date 5/19/2010. |
| Property will be (check one):  |                    |  |  |
| ☐ Surrendered  | ■ Retained         |  |  |
| If retaining the property, I intend to (check a ☐ Redeem the property                                      | it least one):     |  |  |
| Reaffirm the debt  | (for avample, av   | oid lian using 11 U.S.C.   | 8 522(f))  |
| ☐ Other. Explain   | (for example, av   | oid lien using 11 U.S.C  | . § 322(1)).   |
| Property is (check one):   |                    |  |  |
| ■ Claimed as Exempt  |                    | ☐ Not claimed as exe   | empt   |
| Attach additional pages if necessary.)  Property No. 1   |                    |  |  |
| Lessor's Name:<br>-NONE-   | Describe Leased Pr | operty:  | Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2):  ☐ YES ☐ NO   |
| I declare under penalty of perjury that the personal property subject to an unexpired  Date March 27, 2010 |                    | intention as to any project /s/ Michael Darwin Thibodo Debtor    | bodeau   |
| Date March 27, 2010  | Signature          | /s/ Corinne Denise Thil<br>Corinne Denise Thiboo<br>Joint Debtor |  |

#### Form 1007-1 - Statement Of Compensation By Debtor's Attorney

#### United States Bankruptcy Court District of Minnesota

| In re | Michael Darwin Thibodeau<br>Corinne Denise Thibodeau |           | Case No. |   |
|-------|--|-----------|----------|---|
|       |  | Debtor(s) | Chapter  | 7 |
|       |  |           |          | • |

#### STATEMENT OF COMPENSATION BY ATTORNEY FOR DEBTOR(S)

The undersigned, pursuant to Local Rule 1007-1, Bankruptcy Rule 2016(b) and § 329(a) of the Bankruptcy Code, states that:

- 1. The undersigned is the attorney for the debtor(s) in this case and files this statement as required by applicable rules.
- 2. (a) The filing fee paid by the undersigned to the clerk for the debtor(s) in this case is: \$ 299.00
  - (b) The compensation paid or agreed to be paid by the debtor(s) to the undersigned is: \$ \_\_\_\_\_1,301.00
  - (c) Prior to filing this statement, the debtor(s) paid to the undersigned: \$ 1,301.00
  - (d) The unpaid balance due and payable by the debtor(s) to the undersigned is: \$ 0.00
- 3. The services rendered or to be rendered include the following:
  - (a) analysis of the financial situation and rendering advice and assistance to the debtor in determining whether to file a petition under Title 11 of the United States Code;
  - (b) preparation and filing of the petition, exhibits, attachments, schedules, statements and lists and other documents required by the court;
  - (c) representation of the debtor(s) at the meeting of creditors;
  - (d) other services reasonably necessary to represent the debtor(s) in this case.
- 4. The source of all payments by the debtor(s) to the undersigned was or will be from earnings or other current compensation of the debtor(s), and the undersigned has not received and will not receive any transfer of property other than such payments by the debtor(s), except as follows:
- 5. The undersigned has not shared or agreed to share with any other person other than with members of undersigned's law firm any compensation paid or to be paid.

| Dated: | March 27, 2010 | Signed: | /s/ Michael G. Blee            |
|--------|----------------|---------|--------------------------------|
|        |                | C       | Michael G. Blee                |
|        |                |         | Attorney for Debtor(s)         |
|        |                |         | Blee Law Office, Ltd           |
|        |                |         | 14 North 7th Ave               |
|        |                |         | Ste 117                        |
|        |                |         | St Cloud, MN 56303             |
|        |                |         | 320/253-5000 Fax: 320-253-0534 |

LOCAL RULE REFERENCE: 1007-1

WARNING: Effective December 1, 2009, the 15-day deadline to file schedules and certain other documents under Bankruptcy Rule 1007(c) is shortened to 14 days. For further information, see note at bottom of page 2

# UNITED STATES BANKRUPTCY COURT DISTRICT OF MINNESOTA

# NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

#### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total Fee \$299)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

Many filing deadlines change on December 1, 2009. Of special note, 12 rules that set 15 days to act are amended to require action within 14 days, including Rule 1007(c), filing the initial case papers; Rule 3015(b), filing a chapter 13 plan; Rule 8009(a), filing appellate briefs; and Rules 1019, 1020, 2015, 2015.1, 2016, 4001, 4002, 6004, and 6007.

B 201B (Form 201B) (12/09)

Michael Darwin Thibodeau

### United States Bankruptcy Court District of Minnesota

| In re Corinne Denise Thibodeau                                   |  | Case No.               |                            |
|--|--|------------------------|----------------------------|
|  | Debtor(s)  | Chapter 7              |                            |
|  | F NOTICE TO CONSUM<br>(b) OF THE BANKRUPT                | •                      | 5)                         |
| $I\ (We), \ the\ debtor(s), \ affirm\ that\ I\ (we)\ have$ Code. | Certification of Debtor received and read the attached r | notice, as required by | § 342(b) of the Bankruptcy |
| Michael Darwin Thibodeau<br>Corinne Denise Thibodeau             | X /s/ Michael Da   | arwin Thibodeau        | March 27, 2010             |
| Printed Name(s) of Debtor(s)                                     | Signature of I   | Debtor                 | Date                       |
| Case No. (if known)  | X /s/ Corinne De   | enise Thibodeau        | March 27, 2010             |
|  | Signature of J   | foint Debtor (if any)  | Date                       |
|  |  |                        |                            |

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

# United States Bankruptcy Court District of Minnesota

| In re  | Corinne Denise Thibodeau                     |  | Case No.                                |  |
|--------|--|--|---|--|
|        |  | Debtor(s)                              | Chapter 7                               |  |
|        | VERIFICA                                     | TION OF CREDITOR                       | MATRIX                                  |  |
| The ab | ove-named Debtors hereby verify that the att | tached list of creditors is true and c | correct to the best of their knowledge. |  |
| Date:  | March 27, 2010                               | /s/ Michael Darwin Thibodeau           |   |  |
|        |  | Michael Darwin Thibodeau               |   |  |
|        |  | Signature of Debtor                    |   |  |
| Date:  | March 27, 2010                               | /s/ Corinne Denise Thibodeau           |   |  |
|        | <del>-</del>                                 | Corinne Denise Thibodeau               |   |  |
|        |  | Signature of Debtor                    |   |  |

Michael Darwin Thibodeau

BEST BUY
PO BOX 15524
WILMINGTON DE 19850-5524

CAPITAL ONE PO BOX 105474 ATLANTA GA 30348

CAPITAL ONE
PO BOX 30273
SALT LAKE CITY UT 84130-0273

CAPITAL ONE NA 2730 LIBERTY AV PITTSBURGH PA 15222

CENTRACARE CLINIC 1200 6TH AVE NO SAINT CLOUD MN 56303-2736

CITI CARDS
PO BOX 6000
THE LAKES NV 89163-6000

CITI CARDS PO BOX 6241 SIOUX FALLS SD 57117-6241

CITIBANK CARDMEMBER SERVICES PO BOX 6189 SIOUX FALLS SD 57117

DISCOVER
PO BOX 6103
CAROL STREAM IL 60197-6103

DISCOVER FINANCIAL SERVICES PO BOX 15316 WILMINGTON DE 19850

FASHION BUG
PO BOX 659450
SAN ANTONIO TX 78265-9450

FASHION BUG 1103 ALLEN DR MILFORD OH 45150

GREAT LAKES MEDICAL BILLING PO BOX 9 CROSSLAKE MN 56442

GREAT RIVER FED CREDIT UNION 1532 WEST ST GERMAIN PO BOX 1208 SAINT CLOUD MN 56302-1208

JC CHRISTENSEN & ASSOC PO BOX 519
SAUK RAPIDS MN 56379

JC PENNEY
PO BOX 960090
ORLANDO FL 32896-0090

JC PENNEY
PO BOX 981131
EL PASO TX 79998

KOHLS PO BOX 3115 MILWAUKEE WI 53201-3115 MEMBERS CO-OP CREDIT UNIOIN 101 14TH ST CLOQUET MN 55720

MEMBERS CO-OP CREDIT UNIOIN 215 N 40TH AVE W DULUTH MN 55807

MORTGAGE ELECTRONIC REGIS SYS 1818 LIBRARY ST STE 300 RESTON VA 20190

MORTGAGE SERVICE CENTER 4001 LEADENHALL RD MOUNT LAUREL NJ 08054

PHH MORTGAGE SERVICES
PO BOX 5452
MOUNT LAUREL NJ 08054-5452

PHH MORTGAGE SERVICES 4001 LEADENHALL RD MOUNT LAUREL NJ 08054

RIVER CITY DENTAL 1201 MAINE PRAIRIE RD SAINT CLOUD MN 56301

RIVER CITY DENTAL PO BOX 280 SAINT CLOUD MN 56302-0280

SEARS CREDIT CARDS PO BOX 688957 DES MOINES IA 50368-8957 SHAPIRO & ZIELKE 12550 WEST FRONTAGE RD STE 200 BURNSVILLE MN 55337

US BANK 1015 W ST GERMAIN SAINT CLOUD MN 56301

US BANK
PO BOX 790179
SAINT LOUIS MO 63179-0179

US BANK
PO BOX 5227
CINCINNATI OH 45201-5227

VICTORIA'S SECRET PO BOX 182117 COLUMBUS OH 43218

VICTORIA'S SECRET 4590 E BROAD ST COLUMBUS OH 43213

WELLS FARGO EDUC FINANCIAL SVC 301 E 58TH ST N SIOUX FALLS SD 57104

WELLS FARGO FINANCIALNATL BANK PO BOX 94498 LAS VEGAS NV 89193-4498

| In re  | Michael Darwin Thibodeau<br>Corinne Denise Thibodeau | According to the information required to be entered on this statement |
|--------|--|---|
|        | Debtor(s)  | (check one box as directed in Part I, III, or VI of this statement):  |
| Case N | Number:  | ☐ The presumption arises.   |
|        | (If known)   |   |
|        |  | ■ The presumption does not arise.                                     |
|        |  | $\square$ The presumption is temporarily inapplicable.                |
|        |  |   |

# CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor, whether or not filing jointly. Unless the exclusion in Line 1C applies, joint debtors may complete a single statement. If the exclusion in Line 1C applies, each joint filer must complete a separate statement.

|     | Part I. MILITARY AND NON-CONSUMER DEBTORS  |  |  |  |  |  |
|-----|--|--|--|--|--|--|
| 1A  | <b>Disabled Veterans.</b> If you are a disabled veteran described in the Declaration in this Part IA, (1) check the box at the beginning of the Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.  |  |  |  |  |  |
| 111 | □ <b>Declaration of Disabled Veteran.</b> By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)).   |  |  |  |  |  |
| 1B  | <b>Non-consumer Debtors.</b> If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.   |  |  |  |  |  |
|     | ☐ Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts.   |  |  |  |  |  |
|     | Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends. |  |  |  |  |  |
| 1C  | □ Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard   |  |  |  |  |  |
|     | a.   I was called to active duty after September 11, 2001, for a period of at least 90 days and  I remain on active duty /or/  I was released from active duty on, which is less than 540 days before this bankruptcy case was filed;  |  |  |  |  |  |
|     | OR   |  |  |  |  |  |
|     | <ul> <li>b. □ I am performing homeland defense activity for a period of at least 90 days /or/</li> <li>□ I performed homeland defense activity for a period of at least 90 days, terminating on, which is less than 540 days before this bankruptcy case was filed.</li> </ul>   |  |  |  |  |  |

|     | Part II. CALCULATION OF M   | 10N   | THLY INC               | CON    | ЛЕ F    | OR § 70       | 7(b)(7   | ) E                                      | XCLUSION        |           |             |
|-----|---|-------|------------------------|--------|---------|---------------|----------|--|-----------------|-----------|-------------|
|     | Marital/filing status. Check the box that applies   |       |                        |        |         |               | is state | men                                      | t as directed.  |           |             |
|     | a. Unmarried. Complete only Column A ("D  |       |                        |        |         |               |          |  |                 |           |             |
| 2   | <ul> <li>b. ☐ Married, not filing jointly, with declaration of separate households. By checking this bound in the specific of the separate in the separate of the separate in the separate of the separate in the separat</li></ul> |       |                        |        |         |               | ouse and | nd I are living apart other than for the |                 |           |             |
|     | <ul> <li>c. □ Married, not filing jointly, without the declaration of separate households set out in ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11.</li> </ul>  |       |                        |        |         |               | Line 2.b | abo                                      | ove. Complete b | oth       | Column A    |
|     | d. Married, filing jointly. Complete both Col   |       |                        |        |         |               | m B (''  | Spor                                     | use's Income'') | for       | Lines 3-11. |
|     | All figures must reflect average monthly income re  | eceiv | ed from all sou        | rces,  | deriv   | ed during t   | ne six   |  | Column A        |           | Column B    |
|     | calendar months prior to filing the bankruptcy cas  |       |                        |        |         |               |          |  | Debtor's        |           | Spouse's    |
|     | the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line.   |       |                        |        |         |               | Income   |  | Income          |           |             |
| 3   | Gross wages, salary, tips, bonuses, overtime, co  | mmi   | ssions.                |        |         |               |          | \$                                       | 3,318.00        | \$        | 2,190.67    |
|     | Income from the operation of a business, profes   |       |                        |        |         |               | a and    |  |                 |           |             |
|     | enter the difference in the appropriate column(s) of  |       |                        |        |         |               | Ъ        |  |                 |           |             |
|     | business, profession or farm, enter aggregate number of enter a number less than zero. <b>Do not include</b>  |       |                        |        |         |               |          |  |                 |           |             |
| 4   | Line b as a deduction in Part V.  | uny   | part of the bu         | SIIIC  | 35 CAP  | chises effect | cu on    |  |                 |           |             |
|     |   |       | Debtor                 |        |         | Spouse        |          |  |                 |           |             |
|     | a. Gross receipts   | \$    |                        | 00     |         |               | 0.00     |  |                 |           |             |
|     | b. Ordinary and necessary business expenses c. Business income  | \$    | 0.<br>btract Line b fr | 00 I   |         |               | 0.00     | \$                                       | 0.00            | Ф         | 0.00        |
|     | L   | -     |                        |        |         | 1 1:66        |          | Ф  | 0.00            | Φ         | 0.00        |
|     | <b>Rents and other real property income.</b> Subtract the appropriate column(s) of Line 5. Do not enter   |       |                        |        |         |               |          |  |                 |           |             |
|     | part of the operating expenses entered on Line  |       |                        |        |         |               | 4423     |  |                 |           |             |
| 5   |   |       | Debtor                 |        |         | Spouse        |          |  |                 |           |             |
|     | a. Gross receipts   | \$    |                        | .00    |         |               | 0.00     |  |                 |           |             |
|     | <ul><li>b. Ordinary and necessary operating expenses</li><li>c. Rent and other real property income</li></ul>   |       | btract Line b fr       | .00    |         |               | 0.00     | \$                                       | 0.00            | <b>\$</b> | 0.00        |
| 6   |   | Su    | otract Line o n        | OIII L | anie a  |               |          |  |                 |           |             |
| 6   | Interest, dividends, and royalties.   |       |                        |        |         |               |          | \$                                       | 0.00            |           | 0.00        |
| 7   | Pension and retirement income.  |       | 1 1                    | C 4    | (1 1    |               |          | \$                                       | 0.00            | \$        | 0.00        |
| 0   | Any amounts paid by another person or entity, expenses of the debtor or the debtor's dependent  |       |                        |        |         |               | ŧ.       |  |                 |           |             |
| 8   | <b>purpose.</b> Do not include alimony or separate mair   |       |                        |        |         |               |          |  |                 |           |             |
|     | spouse if Column B is completed.  |       |                        |        |         |               |          | \$                                       | 0.00            | \$        | 0.00        |
|     | Unemployment compensation. Enter the amount   | in th | e appropriate c        | olum   | nn(s) c | of Line 9.    |          |  |                 |           |             |
|     | However, if you contend that unemployment complement under the Social Security Act, do not list the   |       |                        |        |         |               |          |  |                 |           |             |
| 9   | or B, but instead state the amount in the space below   |       | nount of such c        | omp.   | CHBUIL  | on in corar   |          |  |                 |           |             |
|     | Unemployment compensation claimed to  |       |                        |        |         |               |          |  |                 |           |             |
|     | be a benefit under the Social Security Act Debte  | or\$  | 0.00                   | Spo    | use \$  |               | 0.00     | \$                                       | 0.00            | \$        | 0.00        |
|     | <b>Income from all other sources.</b> Specify source ar   |       |                        |        |         |               |          |  |                 |           |             |
|     | on a separate page. Do not include alimony or se<br>spouse if Column B is completed, but include al   |       |                        |        |         |               |          |  |                 |           |             |
|     | maintenance. Do not include any benefits receive  |       |                        |        | •       | -             |          |  |                 |           |             |
| 10  | received as a victim of a war crime, crime against  |       |                        |        |         |               |          |  |                 |           |             |
| 10  | domestic terrorism.   | _     | D. L.                  | 1      |         |               |          |  |                 |           |             |
|     | a.  | \$    | Debtor                 |        | \$      | Spouse        |          |  |                 |           |             |
|     | b.  | \$    |                        |        | \$      |               |          |  |                 |           |             |
|     | Total and enter on Line 10  |       |                        |        |         |               |          | \$                                       | 0.00            | \$        | 0.00        |
| 11  | Subtotal of Current Monthly Income for § 707(   | b)(7) | • Add Lines 3 t        | hru    | 10 in ( | Column A      | and, if  |  | 2.20            | -         | 3.30        |
| 1.1 | Column B is completed add Lines 3 through 10 in   |       |                        |        |         |               | ,        | \$                                       | 3.318.00        | \$        | 2.190.67    |

| 12 | <b>Total Current Monthly Income for § 707(b)(7).</b> If Column B has been completed, add Line Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enthe amount from Line 11, Column A.  | · ·               |         | 5,508.67         |
|----|---|-------------------|---------|------------------|
|    | Part III. APPLICATION OF § 707(b)(7) EXCLUS   | ION               |         |                  |
| 13 | <b>Annualized Current Monthly Income for § 707(b)(7).</b> Multiply the amount from Line 12 by enter the result.   | the number 12 and | \$      | 66,104.04        |
| 14 | <b>Applicable median family income.</b> Enter the median family income for the applicable state at (This information is available by family size at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the ba   |                   |         |                  |
|    | a. Enter debtor's state of residence: MN b. Enter debtor's household size:  | 3                 | \$      | 75,073.00        |
| 15 | Application of Section 707(b)(7). Check the applicable box and proceed as directed.  ■ The amount on Line 13 is less than or equal to the amount on Line 14. Check the box f top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI or □ The amount on Line 13 is more than the amount on Line 14. Complete the remaining page 1. | VII.              | does no | ot arise" at the |

Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)

|   | Part IV. CALCULA  | TION OF CURI          | RENT   | MONTHLY INCOM                | ME FOR § 707(b)(2 | 2) |  |
|---|---|-----------------------|--------|------------------------------|-------------------|----|--|
| 16 Enter the amount from Line 12.   |   |                       |        |                              |                   |    |  |
| 17  |   |                       |        |                              |                   |    |  |
|   | a.<br>b.  |                       |        | \$<br>\$                     |                   |    |  |
|   | c.  |                       |        | \$                           |                   |    |  |
|   | d.  |                       |        | \$                           |                   |    |  |
|   | Total and enter on Line 17  |                       |        | <u>.</u>                     |                   | \$ |  |
| 18  | Current monthly income for § 707  | (b)(2). Subtract Line | 17 fro | m Line 16 and enter the resi | ult.              | \$ |  |
| Subpart A: Deductions under Standards of the Internal Revenue Service (IRS)  National Standards: food, clothing and other items. Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable household size. (This information is available at |   |                       |        |                              |                   | \$ |  |
| 19B   | National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) Enter in Line b1 the number of members of your household who are under 65 years of age, and enter in Line b2 the number of members of your household who are 65 years of age or older. (The total number of household members must be the same as the number stated in Line |                       |        |                              |                   |    |  |
|   | b1. Number of members   |                       | b2.    | Number of members            |                   |    |  |
|   | c1. Subtotal  |                       | c2.    | Subtotal                     |                   | \$ |  |
| 20A   | Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and  |                       |        |                              |                   |    |  |

|     | T   |  | 1  |  |  |
|-----|---|--|----|--|--|
| 20B | Local Standards: housing and utilities; mortgage/rent expense. Housing and Utilities Standards; mortgage/rent expense for your co available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy Monthly Payments for any debts secured by your home, as stated in the result in Line 20B. Do not enter an amount less than zero. |  |    |  |  |
| 200 |   | I o  |    |  |  |
|     | a. IRS Housing and Utilities Standards; mortgage/rental expens  | se \$  |    |  |  |
|     | b. Average Monthly Payment for any debts secured by your  | \$   |    |  |  |
|     | home, if any, as stated in Line 42  c. Net mortgage/rental expense  | Subtract Line b from Line a.                     | \$ |  |  |
|     |   |  | Ψ  |  |  |
| 21  | Local Standards: housing and utilities; adjustment. If you conte 20B does not accurately compute the allowance to which you are er Standards, enter any additional amount to which you contend you a contention in the space below:   | \$   |    |  |  |
|     | Local Standards: transportation; vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation.  |  |    |  |  |
| 22A | Check the number of vehicles for which you pay the operating experincluded as a contribution to your household expenses in Line 8.  |  |    |  |  |
|     | □ 0 □ 1 □ 2 or more.  | a max is is                                      |    |  |  |
|     | If you checked 0, enter on Line 22A the "Public Transportation" am<br>Transportation. If you checked 1 or 2 or more, enter on Line 22A th   |  |    |  |  |
|     | Standards: Transportation for the applicable number of vehicles in t  |  |    |  |  |
|     | Census Region. (These amounts are available at www.usdoj.gov/ust  |  | \$ |  |  |
|     |   |  | Ψ  |  |  |
|     | Local Standards: transportation; additional public transportation for a vehicle and also use public transportation, and you contend the   |  |    |  |  |
| 22B | you public transportation expenses, enter on Line 22B the "Public T   |  |    |  |  |
|     | Standards: Transportation. (This amount is available at www.usdoj.  |  |    |  |  |
|     | court.)   |  |    |  |  |
|     | Local Standards: transportation ownership/lease expense; Vehic you claim an ownership/lease expense. (You may not claim an ownership/lease)   |  |    |  |  |
|     | $\square$ 1 $\square$ 2 or more.  |  |    |  |  |
|     | Enter, in Line a below, the "Ownership Costs" for "One Car" from  |  |    |  |  |
| 23  | (available at www.usdoj.gov/ust/ or from the clerk of the bankruptc   |  |    |  |  |
|     | Monthly Payments for any debts secured by Vehicle 1, as stated in 1 the result in Line 23. <b>Do not enter an amount less than zero.</b>  | Line 42; subtract Line b from Line a and enter   |    |  |  |
|     |   | l o  |    |  |  |
|     | a. IRS Transportation Standards, Ownership Costs  Average Monthly Payment for any debts secured by Vehicle  | \$   |    |  |  |
|     | b. 1, as stated in Line 42  | \$   |    |  |  |
|     | c. Net ownership/lease expense for Vehicle 1  | Subtract Line b from Line a.                     | \$ |  |  |
|     | Local Standards: transportation ownership/lease expense; Vehice the "2 or more" Box in Line 23.   |  |    |  |  |
| 24  | Enter, in Line a below, the "Ownership Costs" for "One Car" from t (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankrupte Monthly Payments for any debts secured by Vehicle 2, as stated in the result in Line 24. <b>Do not enter an amount less than zero.</b>  |  |    |  |  |
|     | a. IRS Transportation Standards, Ownership Costs  | \$   |    |  |  |
|     | Average Monthly Payment for any debts secured by Vehicle  |  |    |  |  |
|     | b. 2, as stated in Line 42  | \$   |    |  |  |
|     | c. Net ownership/lease expense for Vehicle 2  | Subtract Line b from Line a.                     | \$ |  |  |
|     | Other Necessary Expenses: taxes. Enter the total average monthly  | expense that you actually incur for all federal. |    |  |  |
| 25  | state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social  |  |    |  |  |
|     | security taxes, and Medicare taxes. Do not include real estate or sa  |  | \$ |  |  |
| 26  | Other Necessary Expenses: involuntary deductions for employment, such as retirement   |  |    |  |  |
|     | Do not include discretionary amounts, such as voluntary 401(k)  | contributions.                                   | \$ |  |  |
|     |   |  |    |  |  |

5

| 27  | Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.   |  |                                   | \$ |
|---|---|--|-----------------------------------|----|
| 28  | Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44.  |  |                                   | \$ |
| 29  | Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.   |  |                                   | \$ |
| 30  | Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare - such as baby-sitting, day care, nursery and preschool. Do not include other educational payments.   |  |                                   | \$ |
| 31  | Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on   |  |                                   | \$ |
| 32  | Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service - to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.  |  |                                   | \$ |
| 33  | Total Ex  | xpenses Allowed under IRS Standards. Enter | the total of Lines 19 through 32. | \$ |
| Subpart B: Additional Living Expense Deductions Note: Do not include any expenses that you have listed in Lines 19-32 |   |  |                                   |    |
|   | Health I<br>the categ<br>dependen   |  |                                   |    |
| 34  | a.  | Health Insurance                           | \$                                |    |
|   | b.  | Disability Insurance                       | \$                                |    |
|   | c.  | Health Savings Account                     | \$                                | \$ |
|   | Total and   | d enter on Line 34.                        |                                   |    |
|   | If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below:  \$   |  |                                   |    |
| 35  | Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses.   |  |                                   | \$ |
| 36  | <b>Protection against family violence.</b> Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.   |  |                                   | \$ |
| 37  | Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.   |  |                                   | \$ |
| 38  | Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$137.50 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards. |  |                                   | \$ |

| 39  | Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.   |                                   |  |      | \$                         |  |    |
|---|--|-----------------------------------|--|------|----------------------------|--|----|
| 40  | Continued charitable contributions. Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2).   |                                   |  |      | \$                         |  |    |
| 41  | Tota   | l Additional Expense Deductions   | under § 707(b). Enter the total of L   | ines | s 34 through 40            |  | \$ |
|   |  | Sı                                | ubpart C: Deductions for Del   | bt l | Payment                    |  |    |
| 42  | <b>Future payments on secured claims.</b> For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, and state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 42.   |                                   |  |      |                            |  |    |
|   |  | Name of Creditor                  | Property Securing the Debt   | F    | Average Monthly<br>Payment | Does payment include taxes or insurance? |    |
|   | a.   |                                   |  | \$   |                            | □yes □no                                 |    |
|   |  |                                   |  | ,    | Total: Add Lines           |  | \$ |
| 43  | Other payments on secured claims. If any of debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page.    Name of Creditor |                                   |  | \$   |                            |  |    |
| 44  | Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 28.   |                                   |  |      | \$                         |  |    |
|   | <b>Chapter 13 administrative expenses.</b> If you are eligible to file a case under Chapter 13, complete the following chart, multiply the amount in line a by the amount in line b, and enter the resulting administrative expense.   |                                   |  |      |                            |  |    |
| 45  | a.<br>b.   | issued by the Executive Office    | rict as determined under schedules<br>for United States Trustees. (This<br>w.usdoj.gov/ust/ or from the clerk of | \$ x | otal: Multiply Line        | es a and b                               | \$ |
| 46  | <b>Total Deductions for Debt Payment.</b> Enter the total of Lines 42 through 45.  |                                   |  |      | \$                         |  |    |
| Subpart D: Total Deductions from Income           |  |                                   |  |      |                            |  |    |
| 47  | Tota   | l of all deductions allowed under | § 707(b)(2). Enter the total of Lines  | 33,  | 41, and 46.                |  | \$ |
| Part VI. DETERMINATION OF § 707(b)(2) PRESUMPTION |  |                                   |  |      |                            |  |    |
| 48  | Ente   | r the amount from Line 18 (Curr   | rent monthly income for § 707(b)(2)  | ))   |                            |  | \$ |
| 49  | Enter the amount from Line 47 (Total of all deductions allowed under § 707(b)(2))  |                                   |  | \$   |                            |  |    |
| 50  | Monthly disposable income under § 707(b)(2). Subtract Line 49 from Line 48 and enter the result.   |                                   |  | \$   |                            |  |    |
| 51  | <b>60-month disposable income under § 707(b)(2).</b> Multiply the amount in Line 50 by the number 60 and enter the result.   |                                   |  | \$   |                            |  |    |

|                                    | Initial presumption determination. Check the applicable box and proceed as directed.  |                                   |  |  |  |  |
|------------------------------------|---|-----------------------------------|--|--|--|--|
| 52                                 | ☐ The amount on Line 51 is less than \$6,575. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI.            |                                   |  |  |  |  |
|                                    | ☐ The amount set forth on Line 51 is more than \$10,950 Cherstatement, and complete the verification in Part VIII. You may a  |                                   |  |  |  |  |
|                                    | ☐ The amount on Line 51 is at least \$6,575, but not more than \$10,950. Complete the remainder of Part VI (Lines 53 through 55).   |                                   |  |  |  |  |
| 53                                 | Enter the amount of your total non-priority unsecured debt \$   |                                   |  |  |  |  |
| 54                                 | Threshold debt payment amount. Multiply the amount in Line  | 53 by the number 0.25 and enter   | er the result. \$                            |  |  |  |
|                                    | Secondary presumption determination. Check the applicable b   | ox and proceed as directed.       |  |  |  |  |
| 55                                 | ☐ The amount on Line 51 is less than the amount on Line 54. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII.  |                                   |  |  |  |  |
|                                    | ☐ The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. |                                   |  |  |  |  |
|                                    |   |                                   |  |  |  |  |
|                                    | Part VII. ADDITIONA   | L EXPENSE CLAIMS                  |  |  |  |  |
| 56                                 | Other Expenses. List and describe any monthly expenses, not of you and your family and that you contend should be an additional 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate item. Total the expenses.        | l deduction from your current i   | monthly income under §                       |  |  |  |
|                                    |   |                                   |  |  |  |  |
|                                    | Expense Description a.  | \$                                | Monthly Amount                               |  |  |  |
|                                    | b.  | \$                                |  |  |  |  |
|                                    | c.  | \$                                |  |  |  |  |
|                                    | d.  | \$                                |  |  |  |  |
| Total: Add Lines a, b, c, and d \$ |   |                                   |  |  |  |  |
|                                    | Part VIII. VEI  | RIFICATION                        |  |  |  |  |
|                                    | I declare under penalty of perjury that the information provided i  | n this statement is true and corn | rect. (If this is a joint case, both debtors |  |  |  |
|                                    | must sign.) Date: March 27, 2010  | Signature: /s/ Micha              | el Darwin Thibodeau                          |  |  |  |
|                                    | Date. March 21, 2010  |                                   | Darwin Thibodeau                             |  |  |  |
| 57                                 |   | ioridor i                         | (Debtor)                                     |  |  |  |
|                                    | Date: March 27, 2010  | Signature /s/ Corinr              | ne Denise Thibodeau                          |  |  |  |
|                                    | ·   |                                   | Denise Thibodeau                             |  |  |  |
|                                    |   |                                   | (Joint Debtor, if any)                       |  |  |  |

## **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 09/01/2009 to 02/28/2010.

Line 3 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Spee Dee Delivery

Income by Month:

| 6 Months Ago: | 09/2009            | \$2,871.84 |
|---------------|--------------------|------------|
| 5 Months Ago: | 10/2009            | \$3,127.62 |
| 4 Months Ago: | 11/2009            | \$2,968.56 |
| 3 Months Ago: | 12/2009            | \$4,888.08 |
| 2 Months Ago: | 01/2010            | \$2,970.90 |
| Last Month:   | 02/2010            | \$3,081.00 |
|               | Average per month: | \$3,318.00 |
|               |                    |            |

## **Current Monthly Income Details for the Debtor's Spouse**

#### **Spouse Income Details:**

Income for the Period 09/01/2009 to 02/28/2010.

Line 3 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Paynesville Health Care System

Income by Month:

| 6 Months Ago: | 09/2009            | \$2,072.00 |
|---------------|--------------------|------------|
| 5 Months Ago: | 10/2009            | \$2,119.00 |
| 4 Months Ago: | 11/2009            | \$1,928.00 |
| 3 Months Ago: | 12/2009            | \$3,018.00 |
| 2 Months Ago: | 01/2010            | \$2,093.00 |
| Last Month:   | 02/2010            | \$1,914.00 |
|               | Average per month: | \$2,190.67 |